A. SUBJECT: SWT-08-04, REQUEST FOR QUOTATION UNDER GSA SCHEDULE 621 I, SINs: 621-030, 621-035, 621-039 AND 621-025M

MUSCULOSKELETAL SERVICES NAVAL HOSPITAL CAMP PENDLETON, CA

All contractors will be given a fair opportunity to be considered for the delivery order resulting from this request. Specific information for services is as follows:

- 1. SERVICES REQUIRED. This is a firm-fixed price quotation request is for Physician Assistant, Physical Therapist, Registered Nurse, Physical Therapy Assistant and Certified Medical Assistant services at Naval Hospital Camp Pendleton, CA, 92134-92055.
- 2. PERIOD OF PERFORMANCE. The period of performance is from 1 July 2004 through 30 September 2004 with an option to extend (at the discretion of the Government) from 1 October 2004 through 30 September 2005 and from 1 October 2005 through 30 September 2006.
- 3. SPECIFIC REQUIREMENTS. Statements of work that outline, the work to be performed; location of work; hours of performance; applicable professional standards, certifications, education, experience; and, the special requirements of these positions for this quotation are contained in **Attachments 001 through 005**. These requirements supplement but do not supplant the provisions of the schedule contract specified above.
- 4. QUOTATION INFORMATION.
- a. Written responses to this quotation are due to the Contracting Officer NLT 1200 pm local time (Noon EDT) 08 APR 2004. Preferred response method is by email to sdwellen@nmlc.med.navy.mil. The Government will also accept telefaxed responses to: (301) 619-2925 (Attn: Code 21W). The business address of the Contracting Officer is: Commanding Officer, Naval Medical Logistics Command (Attn: Code 21W) 1681 Nelson Street, Fort Detrick, MD 21702-9203. Questions may be directed to sdwellen@nmlc.med.navy.mil. All correspondence shall reference SWT-08-04.
- b. For this quotation, each Contractor's response must contain a completed Pricing Sheet (Section B), a Supplemental Pricing Worksheet for each position (Attachment 006) and a completed resume/curriculum vitae for each position (Attachments 007A through 007E).
- 5. EVALUATION FACTORS AND THE BASIS FOR AWARD.
- a. Evaluation Factors. For this quotation, the Contracting Officer will select the awardee(s) based upon the skills, education, experience, and qualifications of the healthcare workers proposed as they meet or exceed the requirements contained in **Attachments 001 through 004**; then, the relevance of the offeror's experience providing the same or similar services (Past Performance), then the offeror's price. In descending order of importance, the evaluation factors are:
- 1. The relevance of the offeror's experience (using Attachment 009 Past Performance Format) providing similar or like services, then
- 2. The offeror's previous experience in military medical facilities, then
- 3. The offeror's price. The factors to be considered in evaluating prices proposed are:
- (i) Completeness All price information required has been submitted and tracks from Section B of the Delivery Order.
- (ii) Reasonableness The degree to which the proposed prices compare to the prices that a reasonable, prudent person would expect to incur for the same or similar services.

- (iii) Realism The offeror's prices, and supplemental pricing information will be examined to identify unusually low price estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the Delivery Order requirements, and the risk of personnel recruitment and retention problems during Delivery Order performance.
- b. Basis for Award. Multiple awards may be made as a result of this quotation using GSA Contractor Teaming Arrangements; however, the Government reserves the right to make a single award when in the best interest of the Government. Award(s) will be made to the offeror(s) whose quotation(s) is/are the most advantageous to the Government, considering (1) the technical factors listed above, and (2) who have demonstrated positive experience (past performance) in providing Musculoskeletal or Sports Medicine professional services or services of similar complexity, and (3) who has submitted a fair and reasonable and price.

In the evaluation of offerors:

The greatest consideration will be given to offerors who demonstrate successful experience (since 1999) providing all of the labor categories required herein; and,

Lesser consideration will be given to offerors who demonstrate successful experience (since 1999) providing services in some but not all of the labor categories required herein; and

Lesser consideration will be given to offerors who demonstrate successful experience (since 1999) providing professional services similar to the labor categories required herein but not specifically the labor categories required herein.

In all cases, experience providing dental services is not relevant to this requirement. Additionally, medical services where the healthcare workers are not privileged by a hospital credentialing body (for example, occupational health clinics, prison infirmaries, etc.) are not relevant to this requirement.

The combined technical factors of the offeror's successful experience providing Musculoskeletal or Sports Medicine professional services (past performance) are significantly more important than the offeror's price. However, the closer the merits of the technical factors are to one another, the greater the importance of price in making the award determination.

6. NON-COMPETE CLAUSES.

a. Offerors are directed to Section C, Paragraph 11.11. and its subparagraph with respect to the use of non-compete clauses.

B. Schedule of Prices

- 1. The Contractor shall furnish qualified Health Care Workers in accordance with this delivery order and the basic contract.
- 2. The following activity is/are the sole authority to issue and or modify this Delivery Order:

Naval Medical Logistics Command Code 02 1681 Nelson Street Fort Detrick MD 21702-9203

- 3. This Delivery Order will be placed using a DD Form 1155 signed by the Contracting Officer. It will be executed in writing by the Contracting Officer and transmitted either via mail, facsimile, or electronically via e-mail. If the order is transmitted via e-mail, the contractor shall acknowledge receipt of e-mail.
- 4. Performance of Health Care Worker services at military treatment facilities (MTFs), branch medical clinics (BMCs), or other activities under the cognizance of the Naval Hospital Camp Pendleton, CA are contemplated by this Delivery Order and shall be considered within the scope of these requirements.
- 5. In the event that performance requirements at a particular facility differ slightly from that in the basic contract, those differences shall be defined in this Delivery Order.
- 6. Each Delivery Order will contain at a minimum the following information:
- a. The date of order
- b. Contract number and order number
- c. Description of services

Labor category and, Specific duties and,

Position qualifications and,

Place of performance and,

Hours of operation and,

Quantity required.

- d. The unit price
- e. The period of performance
- f. Accounting and appropriation data
- g. Payment office address
- h. Any other pertinent data
- i. Invoicing and Acceptance instructions
- j. Name of the Contracting Officer's Representative (COR)
- 7. The period of performance of any one Delivery Order shall be for a period of twelve (12) months or less in duration.
- 8. The Government reserves the right to reassign health care workers within a Military Treatment Facility (MTF), to meet patient demand.
- 9. In each Position Specific Statement of Work (Attachments 001 through 005) the Government will disclose specific information concerning the type(s), duration and location(s) of the services to be provided. This notice may include the number of work hours per day that constitutes the "shift" of an individual healthcare worker, the number of hours/shifts required, the times that hours/shifts will be scheduled, and the places where these hours/shifts will be performed. In the event that the Government requires shifts lasting more than 8 hours per day, the parties agree that the Contractor is solely responsible for investigating and determining the applicability of any state and/or local wage or overtime compensation laws with regard to its performance. It is further agreed that the Contractor assumes any and all risk as to the accuracy of its judgment. Accordingly, since the price provided herein reflects the Contractor's

determination, the Contractor shall not be entitled to any equitable price adjustment should a state and/or local agency charged with enforcement of such wage and overtime laws rule that the Contractor's determination was erroneous

10. Offeror Pricing.

SIN	DESCRIPTION	UNIT PRICE	UNIT	NUMBER	TOTAL PRICE
LOT 1	(For Services from 1 Jul 2004 through 30	September 2004)	ı		
621-03	0 PHYSICIAN ASSISTANT	\$	Hours	1024	\$
621-03	5 PHYSICAL THERAPIST	\$	Hours	1536	\$
621-02	5M REGISTERED NURSE	\$	Hours	512	\$
621-03 ASSIS	5 PHYSICAL THERAPY TANT	\$	Hours	1024	\$
621-03	9 CERTIFIED MEDICAL ASSISTANT	\$	Hours	512	\$
LOT 2	(For Services from 1 October 2004 throug	h 30 September 2	<u>2005)</u>		
621-03	0 PHYSICIAN ASSISTANT	\$	Hours	4000	\$
621-03	5 PHYSICAL THERAPIST	\$	Hours	6000	\$
621-02	5M REGISTERED NURSE	\$	Hours	2000	\$
621-03 ASSIS	5 PHYSICAL THERAPY TANT	\$	Hours	4000	\$
621-03	9 CERTIFIED MEDICAL ASSISTANT	\$	Hours	2000	\$
LOT 3	(For Services from 1 October 2005 throug	h 30 September 2	<u>2006)</u>		
621-03	0 PHYSICIAN ASSISTANT	\$	Hours	3984	\$
621-03	5 PHYSICAL THERAPIST	\$	Hours	5976	\$
621-02	5M REGISTERED NURSE	\$	Hours	1992	\$
621-03 ASSIS	5 PHYSICAL THERAPY TANT	\$	Hours	3984	\$
621-03	9 CERTIFIED MEDICAL ASSISTANT	\$	Hours	1992	\$

C. STATEMENT OF WORK.

- NOTE 1: The award of this Delivery Order (DO) will create a Personal Services relationship between the Contractor healthcare worker and the Government. Therefore, the requirements of 10 USC §1089, 10 USC §1091, and all paragraphs in the basic contract related to Personal Services contracting, including the paragraph in the basic contract entitled, "Scope of Work Personal Services Only" shall all apply.
- NOTE 2: The clauses within this Delivery Order supplement but do not supplant the clauses contained in of the Federal Supply Schedule contract FSS/VA 621.1. In the event there is a conflict between the clauses herein and the clauses in the basic contract, the basic contract will always have precedence.
- NOTE 3: The use of <u>Commanding Officer</u> means the Commanding Officer of the military treatment facility or a designated representative, e.g., Contracting Officer's Representative (COR), Department Head, or the head of the activity designated in a particular clinical area.
- NOTE 4: The term <u>healthcare worker</u> (or HCW) refers to the individual(s) providing services under this agreement.
- NOTE 5: The abbreviation <u>MTF</u> refers to the Military Treatment Facility or other Federal healthcare facility at which services are performed.
- 1. During the term of this delivery order, the Contractor agrees to provide, on behalf of the Government, the services identified in Position Specific Statements of Work (**Attachments 001 through 005**) for treatment of active duty military personnel and other eligible beneficiaries, in accordance with the terms and conditions of this contract.
- 2. The Contractor shall provide, medical and healthcare services at the locations specified in Schedule B and each Position Specific Statement of Work (Attachments 001 through 005).

3. RESERVED

- 4. SCHEDULES, ABSENCES, AND LEAVE. Each Attachment will specify the work schedule of each healthcare worker and shall specify the healthcare worker will not accrue leave and is subject to replacement coverage by the contractor during all scheduled and unscheduled absences.
- 4.1. RESERVED. No requirement for healthcare workers who accrue leave.
- 4.2. Positions for which replacement coverage is required.
- 4.2.1. The Contractor shall have sufficient qualified reserve personnel so that all services are provided in the event a healthcare worker scheduled to work becomes ill, resigns, is terminated, or is otherwise unavailable to work. The requirement for services is not mitigated by inclement weather.
- 4.2.2. If a healthcare worker becomes ill or is otherwise unable to fulfill his/her obligation to work, they shall notify the contractor who in turn shall notify the COR.
- 4.2.3. The Contractor is responsible for replacing a healthcare worker who for any reason misses more than 2 hours of a shift.
- 4.2.4. The Contractor shall provide replacement coverage by a healthcare worker who meets the minimum healthcare worker contract qualifications and is approved for work (i.e., has been credentialed and privileged as appropriate and has satisfactorily completed orientation).
- 4.2.5. The contractor shall prepare the schedule of workers for all positions for which replacement coverage is required. Unless otherwise specified in the task order, the specific schedule for each 2-week period shall be provided to the COR 1 month in advance of the 2-week period. The schedule shall be complete and include the name of the

specific healthcare worker and provide the specific individuals who will provide coverage.

- 4.3. Provisions for all healthcare workers.
- 4.3.1. Administrative Leave. For unusual and compelling circumstances (e.g., weather emergencies) in which the Commanding Officer either excuses all facility personnel from reporting to work or dismisses all personnel early, the Commanding Officer is authorized to grant administrative leave to the healthcare worker. This administrative leave may be compensated leave.
- 4.3.2. Furlough. Unless otherwise authorized by a defense appropriations bill, the Government shall not reimburse contractors for services not rendered during a Government furlough. In the event of a Government furlough, the Commanding Officer will determine which healthcare workers are considered critical and therefore must report to work. Healthcare workers deemed critical shall be compensated for services rendered during a furlough. All other healthcare workers shall be furloughed until the Government shutdown ends or they are notified by the Contracting Officer's Representative that they have become critical employees.
- 4.3.3. A healthcare worker with a bona fide medical emergency occurring while on duty, or with an on-the-job injury, will be provided medical care until the condition is stabilized. The contractor shall reimburse the Government for all medical services provided unless the healthcare worker is otherwise entitled to Government medical services.
- 4.3.4. In the instance where the Government directs the healthcare worker to remain on duty in excess of their scheduled shift due to an unforeseen emergency or to complete patient treatment where lack of continuity of care would otherwise jeopardize patient health, the healthcare worker shall remain on duty. The healthcare worker will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the healthcare worker and the Commanding Officer. This provision is not intended to apply to the time required to complete routine tasks (e.g., completion of paperwork or routine administrative tasks at the end of a shift), which are to be completed as part of the shift.
- 4.3.5. Healthcare workers providing services will generally (as specified in the applicable Attachment) receive uncompensated meal breaks of 30 minutes when assigned an 8-hour shift and 30 minutes when assigned a 12-hour shift. The healthcare worker's shift will be 8.5 hours or 12.50 hours, respectively, to constitute a full 8 or 12 hours of on-site service. This includes the Government's right to extend the work shift beyond the scheduled clinic closing time to complete patient care and administrative duties. No healthcare worker shall work beyond their scheduled 8.5 or 12.50 hours per shift.
- 4.3.6. In consonance with state and/or local labor law, healthcare workers may receive one compensated work break in the morning and one in the afternoon. The Government will schedule these breaks consistent with workload requirements. Neither break shall exceed 15 minutes. The Government will accept no liability and will pay no additional costs to the Contractor if the healthcare worker unilaterally decides to forego their scheduled break(s).
- 4.3.7. The Commanding Officer may also grant administrative leave to allow healthcare workers to attend continuing education courses. This administrative leave will not exceed 40 hours per consecutive 12 months, equivalently apportioned for part-time employees. The Government will not reimburse the healthcare worker for the cost of any course tuition and/or other related education expense. The healthcare worker shall provide proof of attendance and successful completion of continuing education to the Commanding Officer upon request.

5. DUTY HOURS.

- 5.1. The Government will identify specific duty hours in each individual Attachment. Unless otherwise specified, services required by an individual healthcare worker shall not exceed 80 hours per two-week (14 consecutive days) period. Any changes in the schedule shall be coordinated between the healthcare worker and the Government. Healthcare workers shall arrive for each scheduled shift in a well-rested condition.
- 5.2. Unless otherwise specified in each individual Attachment, the Contractor shall provide no more than two individuals for each 2,088 (or 2,096 in a leap year) hour requirement.

- 5.3. Individual healthcare workers may be temporarily assigned to another location within a 35 mile commuting area of their assigned MTF/Clinic.
- 5.4. Unless otherwise specified in the Attachment, services of the healthcare workers shall not be required on the day of observance of the following federally established holidays: New Year's Day, Martin Luther King's Birthday, President's Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. Healthcare workers who (1) accrue leave and (2) are scheduled to provide services on the 10 Federal holidays, will be compensated by the Government for these periods of authorized absence. For all positions for which replacement coverage is required, all days are treated equally and the healthcare worker who is not scheduled to provide services on any of the 10 Federal holidays will not be compensated by the Government for the holiday.
- 5.5. The contractor may elect to offer overtime to certain healthcare workers to fill otherwise unfilled shifts, portions of shifts, or scheduled hours of service. Nothing precludes the offer of this overtime to a healthcare worker who would otherwise provide 80 hours of service per two-week (14 consecutive day) period so long as <u>all</u> the following conditions apply:
- 5.5.1. In no case shall the amount of hours worked exceed 51 hours per consecutive 7-day period (calculated at 8.5 hours per shift x 6 shifts which includes uncompensated meal breaks) or 102 hours per consecutive 14 days period (calculated at 8.5 hours per shift x 12 shifts which includes uncompensated meal breaks) and,
- 5.5.2. In no case shall an individual work more than 6 consecutive days and,
- 5.5.3. In no case shall an individual work more than 12.50 hours during any consecutive 24 hour period (including uncompensated meal breaks) and,
- 5.5.4. In no case shall an employee's continued employment be contingent upon their accepting this overtime assignment and,
- 5.5.5. The parties agree that the Contractor is solely responsible for complying with state and/or local wage and overtime compensation laws as described herein and the parties further agree that the Contractor shall not look to the Government for additional reimbursement beyond the price already contained on the applicable hourly pricing for that labor category.

6 FAILURE AND/OR INABILITY TO PERFORM

- 6.1 Should a healthcare worker, who accrues leave and is subject to Government approval of the leave schedule, be unable to perform duties due to medical or physical disability for more than 10 consecutive days, that individuals' performance may be suspended by the Contracting Officer until such medical or physical disability is resolved. If performance is so suspended, no reimbursement shall be made to the contractor for the affected healthcare worker so long as performance is suspended.
- 6.2 If clinical privileges of a healthcare worker have been summarily suspended pending an investigation into questions of professional ethics or conduct, performance by that healthcare worker or for the Contractor in entirety may be suspended until clinical privileges are reinstated. No reimbursement shall be made to the contractor so long as performance is suspended. The denial, suspension, limitation, or revocation of clinical privileges based upon practitioner impairment or misconduct will be reported to the appropriate licensing authorities of the state in which the license is held.
- 6.3 Any healthcare worker(s) demonstrating impaired judgment will be removed from providing healthcare services. The Government reserves the right to remove any employee who, in the judgment of a licensed physician, is impaired by drugs or alcohol. The contractor will reimburse the Government for medical services provided to a contractor's employee in determining "fitness for duty", i.e. to test for potential drug use.

6.4 Any healthcare worker(s) with alcohol or drug abuse problems may be allowed to return to work under the terms of this contract only with prior Government approval.

7. CONTRACT STATUS REVIEW (CSR) MEETINGS.

- 7.1. Each 30–90 days during performance, the Government will require the Contractor to discuss issues germane to the deliver of healthcare under this delivery order. The Government expressly retains the right to require the Contractor to attend face-to-face meetings at the Government's facilities. These meetings, at a minimum will discuss:
- 7.1.1. New healthcare workers who have begun providing services since the last CSR. The Government continually evaluates each healthcare worker's (a) personal interaction skills with patients and other staff, (b) their demonstrated fluency in the English language and, (c) their demonstrated familiarity with the equipment, supplies and material commonly used in the work site. At this meeting, the Government shall inform the Contractor of any employee-related issues that require corrective action on the part of the Contractor.
- 7.1.2. Contract administration issues relative to the efficient operation of the clinical setting.
- 7.1.3. Contractor generated opportunities or innovations aimed at improving services.
- 7.1.4. Any other item to the mutual benefit of the Contractor and the Government.
- 7.2. The Contractor is advised that these meetings are strictly informational and will not change the terms and conditions of this delivery order or the basic contract. A Government contract can only be changed with a signed modification issued by the Contracting Officer.
- 7.3. The Government encourages Contractor's to institute probationary policies for new employees.
- 8. CREDENTIALING.
- 8.1. General Information.
- 8.1.1. Contractor employees shall not provide medical services until the Commanding Officer has granted professional staff membership and clinical privileges. The Commanding Officer is the sole authority for granting and revoking privileges. The Government reserves the right to perform re-verification of credentials information. The Commanding Officer will not grant clinical privileges until the Government determines that credentials information has been satisfactorily verified. Therefore, the Navy considers the existence of Contractor employee within MTF who are not currently privileged, who fail to maintain their privileges or, who have privileges suspended or revoked to be a breach of contract. The Navy will make no payment for services resulting from services by such providers. Services covered or scheduled by such providers are furthermore considered uncovered. The Government additionally reserves the right to terminate this delivery order for Default and/or shall institute other appropriate contractual and/or legal remedies for failure to comply with the terms and conditions of this requirement.
- 8.1.2. The Government will not consider exceptions to the credentials review and clinical privileging process as defined by BUMEDINST 6320.66D and MTF instructions. The Contractor's failure to nominate individuals who do not meet the terms and conditions of this contract, including the requirements of BUMEDINST 6320.66D, shall not excuse non-performance of contract requirements. A copy of BUMEDINST 6320.66D may be obtained at http://nmo.med.navy.mil/Files/Media/directives/6320-66d.pdf
- 8.1.3. Any Contractor or Contractor employee under suspension due to an investigation at any facility or licensing agency shall not be permitted to provide service under this contract. The Contractor shall notify the COR within 24 hours of occurrence of suspension concerning itself of any of its employees. These individuals may only provide services if privileges have been subsequently restored by the Commanding Officer.

- 8.1.4. The denial, suspension, limitation, or revocation of clinical privileges based upon practitioner impairment or misconduct shall be reported to the appropriate licensing authorities of the state in which the license is held.
- 8.1.5. The Government will appoint a member of MTF's Professional Affairs staff to assist the Contractor on all matters relating to credentialing and the application for clinical privileges. The Contractor shall appoint a member of its professional affairs or recruitment staff to coordinate the submission of credentialing information, assuring each file constitutes a complete, valid application for all healthcare workers. For those healthcare workers who currently have either an ICF or IPF on file, the Contractor shall submit to the COR an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with a notation that an active ICF or IPF is on file. Generally, the Government defines the credentialing process as follows:
- 8.1.5.1 COR receives the credentialing package from the Contractor (Day 0).
- 8.1.5.2. COR reviews the package and (if complete) forwards it to the MTF's Professional Affairs staff, or notifies the Contractor of additional documentation required to complete the package, or returns the package to the Contractor (NLT Day 7).
- 8.1.5.3. If the package is complete and is forwarded to the MTF's Professional Affairs staff, credentialing action begins (Days 7-30). The MTF Professional Affairs staff will expedite credentialing actions as much as possible. The Contractor is directed to contact individual CORs at each MTF for the average expectation.
- 8.1.6. If a credentialing package is incomplete and returned to the Contractor or held by the COR pending receipt of additional information, the Contractor assumes full liability for filling or scheduling positions. Appropriate remedies will be instituted for vacancies.
- 8.1.7. Unless otherwise specified herein, the Government reserves the right to extend the credentials of a healthcare worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur (a) within the same command and, (b) when there is no increased clinical competency requirement of the healthcare worker and, (c) when there is no significant change in the scope of clinical practice of the healthcare worker and, (d) when there is no gap in performance between the contracts and, (e) when the healthcare worker has had acceptable performance evaluations.
- 8.1.8. Notwithstanding any actions taken or forborne by the Government's representative, the responsibility to provide fully qualified Contractor employees remains solely with the Contractor. Nothing herein shall limit the Commanding Officer's decision to deny clinical privileges to Contractor employees or to revoke clinical privileges already granted.
- 8.1.9. The MTF will retain the credentials documentation submitted for each healthcare worker within an official Individual Credentials File (ICF) or Individual Professional File (IPF) in accordance with JCAHO, MTF and, Bureau of Medicine and Surgery instructions and directives. The Contractor shall ensure that all documentation necessary to keep each individual file current is submitted to the MTF Professional Affairs Coordinator for inclusion in each file.
- 8.1.10. The Contractor shall maintain a complete employment file for each Contractor employee during the life of this contract. This file shall contain, at a minimum, all the documentation submitted to the Government for each employee. This file and the documents therein shall be kept current and will be made available for Government inspection upon request.
- 8.2. For Positions Requiring Individual Credentials Files (ICFs).
- 8.2.1. Following award and prior to the start of services for each applicable healthcare worker under BUMEDINST 6320.66D and MTF instructions, the contractor shall submit to the COR a completed Individual Credentials File (ICF). The ICF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66D and subsequent revisions.

- 8.3. For Positions Requiring Individual Professional Files (IPFs).
- 8.3.1. Following award and prior to the start of services for each applicable healthcare worker under BUMEDINST 6320.66D and MTF instructions, the contractor shall submit to the COR a completed Individual Professional File (IPF). The IPF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66D and subsequent revisions.
- 8.4. Qualifications Packages.
- 8.4.1. To document compliance with the requirements of the Position Specific Statements of Work (Attachments 001 through 005), the Contractor shall submit a qualifications package to the COR (to be retained by the COR) for each healthcare worker who is not required to submit either an ICF or an IPF (e.g., medical assistants, laboratory technicians, etc). Prior to Contractor employees providing services under this delivery order, the COR will verify the compliance of each healthcare worker with the qualification requirements appropriate to their employment category. The COR will not grant the authority to cover services a healthcare worker until they determine that the qualifications package has been satisfactorily verified. Therefore, the Navy considers the existence of Contractor employee within MTF whose qualifications packages are not approved, who fail to maintain the minimum qualifications for that labor category (via the applicable Attachment), or who have been suspended to be a breach of contract. The Navy will make no payment for services resulting from services by such healthcare workers. Services covered or scheduled by such healthcare workers are furthermore considered uncovered. The Government additionally reserves the right to terminate this delivery order for Default and/or shall institute other appropriate contractual and/or legal remedies for failure to comply with the terms and conditions of this requirement. Generally, the Government defines this review process as follows:
- 8.4.1.1. COR reviews the package and (if complete) notifies the Contractor that the healthcare worker may be scheduled to provide services, or notifies the Contractor of additional documentation required to complete the package, or returns the package to the Contractor (NLT Day 7).
- 8.4.1.2. If a package is incomplete and returned to the Contractor or held by the COR pending receipt of additional information, the Contractor assumes full liability for filling or scheduling positions. Appropriate remedies will be instituted for vacancies.
- 8.5. Interviews. The Government reserves the right to conduct interviews for healthcare workers proposed. If interviews will be required, specific information will be contained in the specific attachment to this delivery order.
- 9. GENERAL ADMINISTRATIVE/TRAINING DUTIES AND RESPONSIBILITIES APPLICABLE TO ALL HEALTHCARE WORKERS. The healthcare worker shall perform a full range of services on site using Government furnished facilities, equipment and supplies. Actual clinical activity will be a function of the overall demand for these services. All healthcare workers shall:
- 9.1. Participate in meetings to review and evaluate the care provided to patients, identify opportunities to improve the care delivered, and recommend corrective action when problems exist. Should a meeting occur outside of scheduled working hours, the healthcare worker shall be required to read and initial the minutes of the meeting.
- 9.2. Participate in the provision of in-service training to members of the clinical and administrative staff on subjects germane to their specialties.
- 9.3. Demonstrate awareness and sensitivity to patient/significant others' rights, as identified within the institution.
- 9.4. Demonstrate awareness of legal issues in all aspects of patient care and unit function and strive to manage situations in a reduced risk manner.
- 9.5. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and clinic activities and provide training and/or direction as applicable to supporting

Government employees (i.e., hospital corpsmen, students, interns, residents, etc.) assigned to you during the performance of duties.

- 9.6. Maintain an awareness of responsibility and accountability for own professional practice.
- 9.7. Participate in continuing education to meet own professional growth.
- 9.8. Attend annual renewal of the following training requirements provided by the Government: family advocacy, disaster training, infection control, sexual harassment, bloodborne pathogens and fire/safety.
- 9.9. Participate in the implementation of the MTF's Family Advocacy Program as directed. Participation shall include, but not be limited to, appropriate medical examination, documentation and reporting.
- 9.10. Contribute to the safe and effective operation of equipment used in patient care within a safe working environment. This shall include safe practices of emergency procedures, proper handling of hazardous materials and maintaining physical security.
- 9.11. Undergo orientation, as appropriate to the position. Orientation may be waived for personnel who have previously provided service at the MTF. Orientations include initial training requirements (e.g. fire, safety, infection control, and family advocacy) and information systems orientation (including the Composite Health Care System (CHCS) and the Ambulatory Data System (ADS)). The Government reserves the right to adjust orientation schedules to meet mission and workload requirements. In addition, healthcare workers identified as CHCS Superusers shall undergo additional training. Requirements for these CHCS Super-users will be specified in individual position specific statements of work.
- 9.12. Healthcare workers shall comply with Executive Order 12731, October 17, 1990, (55 Fed. Reg. 42547), Principles of Ethical Conduct for Government Officers and Employees, and shall also comply with Department of Defense (DOD) other government regulations implementing this Executive Order.
- 9.13. Healthcare workers shall become acquainted with and obey all station regulations, shall perform in a manner to preclude the waste of utilities, and shall not use Government telephones for personal business. All motor vehicles operated on these installations by healthcare workers shall be registered with the base security service according to applicable directives. Eating by healthcare workers is prohibited in patient care areas/clinics and is restricted to designated areas. Smoking is prohibited in all clinic facilities.
- 9.14. Healthcare workers ARE NOT prohibited, by reason of employment under this contract, from conducting a private practice or other employment so long as there is no conflict with the performance of duties under this contract. However, such private practice or other such employment shall not be conducted during those hours in which the healthcare worker is required to render services under this contract. Healthcare workers shall make no use of Government facilities or property in connection with such other employment.
- 9.15. While on duty, healthcare workers shall not advise, recommend, or suggest to individuals authorized to receive services at Government expense that such individuals should receive services from the healthcare worker when they are not on duty, or from a partner or group associated in practice with the contractor, except with the express written consent of the Commanding Officer. The contractor shall not bill individuals entitled to those services rendered pursuant to this contract.
- 9.16. Healthcare workers shall be neat, clean, well groomed, and in appropriate clothing when in patient care and public areas. All clothing shall be free of visible dirt and stains, and shall fit correctly. Fingernails shall be clean and free from dirt and hair shall be neatly trimmed and combed. Healthcare workers shall display an identification badge, which includes the healthcare worker's full name and professional status (furnished by the Government) on the right breast of the outer clothing. Security badges provided by the Government shall be worn when on duty.
- 9.17 The Secretary of the Navy has determined that the illegal possession or use of drugs and paraphernalia in a military setting contributes directly to military drug abuse and undermines Command efforts to eliminate drug abuse among military personnel. The policy of the Department of the Navy (including the Marine Corps) is to deter and

detect drug offenses on military installations. Measures to be taken to identify drug offenses on military installations, and to prevent introduction of illegal drugs and paraphernalia, include routine random inspection of vehicles while entering or leaving, with drug detection dogs when available, and random inspection of personal possessions on entry or exit. If there is probable cause to believe that a healthcare worker has been engaged in use, possession, or trafficking of drugs, the healthcare worker may be detained for a limited period of time until he/she can be removed from the installation or turned over to local law enforcement personnel having jurisdiction. When illegal drugs are discovered in the course of an inspection or search of a vehicle operated by a healthcare worker, the healthcare worker and vehicle may be detained for a reasonable period of time necessary to surrender the individual and vehicle to appropriate civil law enforcement personnel. Action may be taken to suspend, revoke, or deny clinical privileges as well as installation driving privileges. Implicit with the acceptance of this contract is the agreement by the healthcare worker to comply with all Federal and State laws as well as regulations issued by the Commander of the military installation concerning illegal drugs and paraphernalia.

- 9.18 All financial, statistical, personnel, and technical data which are furnished, produced or otherwise available to the contractor during the performance of this contract are considered confidential business information and shall not be used for purposes other than performance of work under this contract. Such data shall not be released by the contractor without prior written consent of the COR. Any presentation of any statistical or analytical materials, or any reports based on information obtained from studies covered by this contract, will be subject to review and approval by the COR before publication or dissemination.
- 9.19. The Contractor shall comply with applicable State and local laws, MTF instructions, policies and procedures.
- 9.20. Contractor personnel shall be subject to an automated data processing (ADP) background check in accordance with DoD Publication 5200.2-R. Personnel shall be required to complete the paper work necessary for the Government to complete this background check.
- 9.21. Healthcare workers shall become familiar with the Naval Hospital formulary. Providers authorized to prescribe pharmaceuticals shall do so according to the availability of drugs listed therein. The Government reserves the right to substitute generic medications for those prescribed by the healthcare worker. Pharmaceuticals shall only be dispensed to authorized beneficiaries of the Military Health System. Unauthorized prescribing may be grounds for revocation of clinical privileges.
- 9.22. When required, to ensure completion of services that extend beyond the normal close of business, the health care worker will remain on duty in excess of the scheduled shift. The health care worker will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the healthcare worker and the workplace supervisor.
- 9.23. All healthcare workers shall adhere to infection control guidelines and practice universal precautions.
- 10. PERSONNEL QUALIFICATIONS THAT APPLY TO ALL HEALTHCARE WORKERS. The contractor shall provide personnel having the minimum levels of education, training and experience. Basic qualification requirements are contained in this section. Additional qualifications specific to a particular labor category are contained in the applicable attachment and may include, but are not be limited to, experience, board certification, or other professional certifications appropriate to the particular labor category. Unique, position specific requirements are also provided in the applicable attachment. The following requirements apply to all individuals providing services under this contract:
- 10.1. Healthcare workers shall read, write, speak, and understand the English language fluently and maintain good communication skills with patients and other healthcare personnel.
- 10.2. Healthcare workers shall be physically capable of standing and/or sitting for extended periods of time and capable of normal ambulation.
- 10.3. Healthcare workers shall be eligible for U.S. employment. No alien shall be allowed to perform under this contract in violation of the Immigration Laws of the United States.

- 10.4. Healthcare workers shall represent an acceptable malpractice risk to the Government.
- 10.5. Healthcare workers shall maintain current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardio Pulmonary Resuscitation) for the Professional Rescuer; or equivalent.
- 10.6. Each healthcare worker shall obtain, at contractor expense, within 60 days prior to start of services, a statement from the healthcare worker's physician or a report of a physical examination indicating that the healthcare worker is free from mental or physical impairments which would restrict the healthcare worker from providing the services described herein. Healthcare workers hired after contract start shall be required to provide a physical exam statement or report obtained within 60 days prior to performance of services. The statement must contain the following information: "Having performed a physical examination on the person named below on (insert date), the following findings are true and accurate:
- 1. (Name of healthcare worker) is suffering from no physical disability which would restrict him/her from providing services as a (specialty).
- 2. (Name of healthcare worker) is not suffering from tuberculosis, hepatitis, sexually transmitted or other contagious diseases which restricts them from providing services as a (specialty). (Name of healthcare worker) has had a current (within 6 months) TB skin test (mantoux) reading or if a known reactor, an evaluation indicating no active disease. If a known reactor, completion of an annual questionnaire is required and can be obtained from the Occupational Health Department at the MTF.
- 3. (Name of healthcare worker) is considered free from Hepatitis B infection on the basis of having (circle the applicable number):
- 3a. Received at least three doses of recombinant hepatitis B vaccine currently licensed in the United States, or,
- 3b. Received an initial dose of the hepatitis B vaccine. The vaccine series shall be completed within 6 months of the employee start date, or,
- 3c. Provided documentation of the healthcare worker's waiver which declines the hepatitis B vaccine as set forth in OSHA guidelines (declination on the basis of religious convictions or medical contraindication only), or,
- 3d. Provided evidence of immunologically effective anti-HB levels in lieu of proof of recombinant hepatitis B vaccines. Assays must be performed in a laboratory accredited by the American Society of Clinical Pathologists (ASCP) and/or the College of American Pathologists (CAP).
- 4. (Name of healthcare worker) is considered to have evidence of immunity to Measles, Mumps and Rubella (MMR) by either (circle one): positive antibody titer, evidence of MMR immunization or, documentation of physician-diagnosed MMR.
- 5. (Name of healthcare worker) shows evidence of immunity to varicella by either (circle one): positive antibody titer; evidence of varicella immunization; or a statement of history of chicken pox.

Examining Physic Examining Physic		
Name: Address: Telephone:	Date:	

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10.7. Except as provided in paragraph herein, no medical tests or procedures required by the contract may be

performed at the MTF. Expenses for all required tests and/or procedures shall be borne by the contractor at no additional expense to the Government.

- 10.8. Further, healthcare workers shall agree to undergo personal health examinations and such other medical and dental examinations at any time during the term of this contract, as the Commanding Officer may deem necessary for preventive medicine, performance improvement, or privileging purposes. These examinations will be provided by the Government. If the contractor chooses, these examinations may be provided by private physician at no expense to the Government. Additionally the healthcare worker must be immunized annually with the influenza vaccine in accordance with the BUMED instruction currently in effect. This vaccine will be provided by the Government. Although this vaccine will be provided by the Government, it may be obtained at other facilities with the cost being borne by the healthcare worker. Unless vaccinated by the Government, the healthcare worker shall be required to show proof of the vaccination. If the healthcare worker chooses to be immunized by the Government, they shall be required to sign a waiver in accordance with MTF rules and regulations. If the healthcare worker declines the immunization, they must provide documentation of the waiver, which declines the influenza vaccine (declination on the basis of religious convictions or medical contraindications only).
- 10.9. For individuals who do not show a positive antibody titer after immunization and appear to have a "non-immune" status, that employee must report varicella exposure to the COR and, in accordance with Centers for Disease Control Recommendations, may need to be removed from patient care duties beginning on the tenth day following exposure and remain away from work for the maximum incubation period of varicella (21 days). In this instance, personnel under this agreement who accrue leave will be considered to be in a leave status; all other personnel must be replaced during this period to ensure maintenance of contractually required coverage.
- 10.10. On an annual basis, healthcare workers must provide a current Purified Protein Derivative (PPD) reading or an evaluation if they are a known PPD reactor. The Contractor is responsible for any expenses incurred for required testing.
- 10.11. The management of HIV positive healthcare workers shall be consistent with current Center for Disease Control Guidelines (CDC) guidelines and Section 503 of Rehabilitation Act (29 U.S.C. Section 793) and its implementing regulations (41 CFR Part 60-741).
- 11. REQUIREMENTS AND CLAUSES SPECIFIC TO THIS DELIVERY ORDER.

11.1. INSPECTION AND ACCEPTANCE

- (a) The Contracting Officer's duly authorized representative, the Contracting Officer's Representative(s), will perform inspection and acceptance of services to be provided.
- (b) For the purposes of this clause, the names of the Contracting Officer's representative(s) will be assigned in each individual Delivery Order issued.
- (c) Inspection and acceptance will be performed at the locations listed in the position specific Statements of Work provided as attachments to this solicitation, or in subsequent Delivery Orders.

11.2. INVOICING INSTRUCTIONS AND PAYMENT FOR SERVICES

- (a) The contractor shall submit invoices in quadruplicate with a copy of the applicable Material Inspection and Receiving Report, DD Form 250, signed by the cognizant Government representative, stating therein the name and title of the Government representative to whom delivery was made and the date of such delivery or period of performance.
- (b) Invoices shall be submitted every two weeks to:

To be specified in individual Delivery Orders: Original and Three Copies

(c) The Government shall process invoices every two weeks for payment.

OR

Invoices for services rendered under this Contract may be submitted electronically through Wide Area Work Flow – Receipt and Acceptance (WAWF):

The vendor shall self-register at the web site https://rmb.ogden.disa.mil. Vendor training is available on the internet at https://wawftraining.com.

A separate invoice will be prepared per Delivery Order. Do not combine the payment claims for services provided under this contract ordered through multiple Delivery Orders within one invoice.

Select the 2-in-1 Invoice within WAWF as the invoice type. The 2-in-1 Invoice prepares the Material Inspection and Receiving Report, DD Form 250, and invoice in one document.

Back up documentation (such as timesheets, etc.) can be included and attached to the invoice in WAWF. Attachments created in any Microsoft Office product are attachable to the invoice in WAWF.

The contractor shall submit invoices for payment per contract terms.

11.3. AWARDS. The Government intends to award Delivery Orders to each offeror selected for contract award. Delivery Orders will order the minimum quantity of services required from each awardee.

Awardees of Delivery Orders will be required to submit complete Credentialing Packages within 30 days following award. Failure to meet the 30-day requirement may result in termination of the Delivery Order. Additionally, failure to submit complete packages within 30 days following award may be considered as negative past performance information that may jeopardize the award of future Delivery Orders, and/or may result in termination of the Delivery Order.

11.4. COMMENCEMENT OF PERFORMANCE

Upon award, a Delivery Order will be transmitted to the Contractor on a DD Form 1155. Approved healthcare workers must begin performance no later than 60 days after execution of the Delivery Order by the Contracting Officer, unless otherwise mutually directed by the Government. If a healthcare worker cannot begin performance on the Delivery Order, the Contractor must notify the Contracting Officer immediately.

Failure to begin performance with the approved healthcare worker may result in termination of the Delivery Order. The Contractor may or may not be given the opportunity to propose a new healthcare worker. The Government reserves the right to terminate the Delivery Order for default if the Contractor fails to begin performance.

11.5. OMBUDSMAN. The ombudsman shall (a) review complaints from Contractors regarding the award of Delivery Order and (b) ensure that all Contractors are afforded a fair opportunity to be considered, consistent with the procedures in the contract. The Delivery Order ombudsman for this contract is the Navy Competition Advocate General. Contractors are encouraged to settle their complaints through the Competition Advocate chain of command, seeking review by the Command Competition Advocate at the Naval Medical Logistics Command before taking their complaints to the Navy Competition Advocate General. The Naval Medical Logistics Command's Competition Advocate can be reached at (301) 619-2158 or at the following address:

Naval Medical Logistics Command ATTN: Executive Officer 1681 Nelson Street Fort Detrick, MD 21702-9203

Fax Number: (301) 619-7430

- 11.6. PRIOR WRITTEN PERMISSION REQUIRED FOR SUBCONTRACTS. None of the services required by this Delivery Order shall be subcontracted to or performed by persons other than the Contractor or the Contractor's employees without the prior written consent of the Contracting Officer.
- 11.7. RESTRICTION ON THE USE OF GOVERNMENT-AFFILIATED PERSONNEL. Without the written approval of the Contracting Officer, the Contractor shall not use, in the performance of this Delivery Order, any U.S. Government employees or persons currently providing services on other Department of Defense contracts.

11.8. SUBSTITUTION OF PERSONNEL.

The Contractor agrees to initiate performance of each Delivery Order using only the healthcare worker(s) whose professional qualifications have been determined technically acceptable by the Government.

No personnel substitutions shall be made by the Contractor without the express consent of the Contracting Officer. All substitution requests will be processed in accordance with this clause. The government retains the right to terminate and re-compete a new Delivery Order.

No personnel substitutions shall be permitted during the period beginning with Delivery Order award and continuing through the first 30 days of performance, unless they are necessitated by a healthcare worker's unexpected illness, injury, death or termination of employment. Should one of these events occur, the Contractor shall promptly notify the Contracting Officer and provide the information required below, in writing.

All substitution requests must provide a detailed explanation of the circumstances necessitating the proposed replacement of personnel. The Contractor shall also demonstrate that the substitute healthcare worker(s) possess professional qualifications that meet the minimum requirements in this Delivery Order and in the position specific Statement of Work contained in the Delivery Order. In addition, all substitution requests shall include a Certificate of Availability signed and dated by each proposed healthcare worker, and any other information identified by the Contracting Officer. The Contracting Officer will evaluate such requests and promptly notify the Contractor or the approval or disapproval thereof.

- 11.9. PERSONNEL QUALIFICATIONS. The Contractor is required to provide personnel having certain minimum levels of education, training and experience. Proof that offered candidates possess these qualifications must be provided with each Contractor's proposal for each Delivery Order. Unique (i.e. position specific) requirements are provided in the position specific Statements of Work furnished as attachments to this Delivery Order.
- 11.10. LIABILITY INSURANCE. Before commencing work under a contract, the Contractor shall certify to the Contracting Officer in writing that the required insurance has been obtained. The following insurance as referenced in FAR 28.307, is the minimum insurance required:
- a. General Liability Bodily injury liability insurance coverage written on the comprehensive form of policy of at least: \$500,000 per occurrence.
- b. Automobile liability insurance written on the comprehensive form of policy. The policy shall provide for bodily injury and property damage liability covering the operation of all automobiles used in connection with performing the contract. Policies covering automobiles operated in the United States shall provide coverage of a least \$200,000 per person and \$500,000 per occurrence for bodily injury and \$20,000 per occurrence for property damage. The amount of liability coverage on other policies shall be commensurate with any legal requirements of the locality and sufficient to meet normal and customary claims.
- c. Worker's compensation and employer's liability. Contractors are required to comply with applicable Federal and State Workers' compensation and occupational disease statutes. If occupational diseases are not compensable under those statutes, they shall be covered under the employer's liability section of the insurance policy, except when Contractor operations are so commingled with a Contractor's commercial operations that it would not be practical to require this coverage. Employer's liability coverage of at least \$100,000 shall be required, except in States with exclusive or monopolistic funds that do not permit workers, compensation to be written by private carriers.

- 11.11. NON-COMPETE CLAUSES The use of non-compete agreements (including non-compete clauses within employment agreements) that are aimed at preventing the loss of Contractor personnel are acceptable only if the non-competition is limited to the current performance period specified in the contract, task order or delivery order. The use of non-compete agreements or clauses that prevent employees of an incumbent Contractor from accepting future employment with either the Government or with another Contractor is not acceptable. Awardees (including sub-Contractors) may not include conditions in employment agreements that hinder the Government's ability to accomplish the current or future mission of providing health and medical care to beneficiaries through the use of these clauses or agreements.
- 11.11.1. The Government reserves the right to query each offeror or Contractor regarding the use and purpose of these clauses or agreements and to use this information in award or logical follow-on decisions. If such conditions are included in employment agreements, the Government further reserves the right to reject an offeror's proposal or to terminate existing contracts.

11.12. CLAUSES INCORPORATED BY FULL TEXT

52.216-18 ORDERING. (OCT 1995)

- (a) Any supplies and services to be furnished under this contract shall be ordered by issuance of delivery orders or task orders by the individuals or activities designated in the Schedule. Such orders may be issued from the date of contract award through a date to be determined, but not exceeding 60 months from contract award, or until all maximum quantities have been delivered, whichever occurs first.
- (b) All delivery orders or task orders are subject to the terms and conditions of this contract. In the event of conflict between a delivery order or task order and this contract, the contract shall control.
- (c) If mailed, a delivery order or task order is considered "issued" when the Government deposits the order in the mail. Orders may be issued orally, by facsimile, or by electronic commerce methods only if authorized in the Schedule.

(End of clause)

52.216-19 ORDER LIMITATIONS. (OCT 1995)

- (a) Minimum order. When the Government requires supplies or services covered by this contract in an amount of less than \$1,000.00, the Government is not obligated to purchase, nor is the Contractor obligated to furnish, those supplies or services under the contract.
- (b) Maximum order. The Contractor is not obligated to honor:
- (1) Any order for a single item in excess of 100,000 hours per individual Line Item;
- (2) Any order for a combination of items in excess of the maximum total requirements for this contract. (See Section B).
- (c) Notwithstanding paragraphs (b) and (c) above, the Contractor shall honor any order exceeding the maximum order limitations in paragraph (b), unless that order (or orders) is returned to the ordering office within 30 days after issuance, with written notice stating the Contractor's intent not to ship the item (or items) called for and the reasons. Upon receiving this notice, the Government may acquire the supplies or services from another source.

(End of clause)

ATTACHMENTS

001	PHYSICL	AN A	SSIST	ANT

002 PHYSICAL THERAPIST

003 REGISTERED NURSE

004 PHYSICAL THERAPY ASSISTANT

005 CERTIFIED MEDICAL ASSISTANT

006 SUPPLEMENTAL PRICING WORKSHEET FOR EACH POSITION

007 RESUME/CURRICULUM VITAE FORMAT

007A PHYSICIAN ASSISTANT

007B PHYSICAL THERAPIST

007C REGISTERED NURSE 007D PHYSICIAL THERAPY ASSISTANT

007E CERTIFIED MEDICAL ASSISTANT

008 PROOF OF US EMPLOYMENT ELIGIBILITY

009 PAST PERFORMANCE FORMAT

ATTACHMENT 001 PHYSICIAN ASSISTANT

- 1. SCOPE AND LOCATION. The healthcare worker provides Physician Assistant services for the Directorate of Specialty Services of Naval Hospital Camp Pendleton, California or its associated Branch Medical Clinics. The primary locations are the Naval Hospital Camp Pendleton and 52 Area Sports Medicine And Rehabilitation Therapy Center. Assignment to another Branch Medical Clinic within a 35-mile radius of Naval Hospital may be required. Scope of duties includes an assessment of patient needs, planning for care, and teaching for patients and their coworkers with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance.
- 2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 4 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.
- 2.1. The contractor shall provide 2 Physician Assistants. The work schedule consists of 8-hour shifts, between 0700-1700 with a .5-hour uncompensated meal break on a Monday through Friday basis. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.
- 2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays and the Friday after Thanksgiving; therefore, the Contractor will not be compensated by the Government for the holidays or the Friday after Thanksgiving.
- 3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Physician Assistant duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Director for Muscularskeletal Services, the Physician Assistant shall:
- 3.1 Obtain a detailed and accurate history, perform an appropriate physical examination, identify, problems, obtain and appropriately record pertinent data and critically evaluate all such information.
- 3.2 Order, perform and/or interpret routine and special diagnostic studies and screening tests, including common laboratory procedures and common radiologic studies.
- 3.3. Perform therapeutic procedures including follow-up of simple fractures.
- 3.4. Instruct and counsel patients regarding physical and mental health.
- 3.5. Record patient progress notes, determining and implementing therapeutic plans and compiling and recording pertinent narrative case summaries.
- 3.6. Provide services to patients requiring continuing care including reviewing and monitoring treatment and therapy plans.

- 3.7. Provide health assessment, diagnosis and implementation of the treatment plan.
- 3.8. Review medical records for completeness and making certain they are maintained in accordance with quality assurance and JCAHO standards.
- 3.9. Attend and actively participating in departmental and staff meetings.
- 3.10. Serve on committees to review, revise and update clinical standard operating procedures.
- 3.11. At the discretion of his/her supervisor, the incumbent may assist in:
- 3.11.1. Supervising and training other clinical staff in their care of clinical staff in their care of clinical patients.
- 3.11.2. Develop and modify treatment and preventive protocols for sports and exercise related activities, injuries and illnesses.
- 3.11.3. Sports and exercise related research projects.
- 3.11.4. Developing training programs for Navy physician and non-physician personnel in Exercise Medicine and Rehabilitation.
- 3.11.5. Providing briefings and presentations of case histories to line commands, programs sponsors, Navy hospitals, Bureau of Medicine and Surgery, other government agencies and professional audiences.
- 4. RESERVED.
- 5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR PHYSICIAN ASSITANT. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:
- 5.1. Possess a degree from a physician assistant training program accredited by the Committee on Allied Health Education and Accreditation (CAHEA) and the National Commission on Certification of Physician Assistants.
- 5.2. Possess a current unrestricted license to practice as a physician assistant in any one of the fifty states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations.
- 5.3. Possess a current Drug Enforcement Agency certification (DEA number), and
- 5.4. Possess certification as a physician assistant by the National Commission on Certification of Physician Assistants.
- 5.5. Possess experience as a Physician Assistant in a Sports Medicine or Orthopedic setting of at least 12 months within the preceding 24 months.
- 5.6. Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.

ATTACHMENT 002 PHYSICAL THERAPIST

- 1. SCOPE AND LOCATION. The healthcare worker provides Physical Therapist services for the Directorate of Specialty Services of Naval Hospital Camp Pendleton, California or its associated Branch Medical Clinics. The primary locations are the Naval Hospital and 52 Area Sports Medicine And Rehabilitation Therapy Center. Assignment to another Branch Medical Clinic within a 35-mile radius of Naval Hospital may be required. Scope of duties requires specialized training and experience, which makes the Physical Thrapist, qualified to provide outpatient and inpatient Physical Therapy care.
- 2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 4 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.
- 2.1. The contractor shall provide 3 Physical Therapists. The work schedule consists of 8-hour shifts, between 0700-1700 with a .5-hour uncompensated meal break on a Monday through Friday basis. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.
- 2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays and the Friday after Thanksgiving; therefore, the Contractor will not be compensated by the Government for the holidays or the Friday after Thanksgiving.
- 3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Physical Therapist duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Rehabilitation Team Leader, the Physical Therapist shall:
- 3.1. Provide appropriate therapeutic procedures and provide a full range of therapy services on site in support of patient referrals from the Naval Hospital Specialty Services. As an ancillary support service, all patient contact and care rendered is expected to be safe and timely and result in achievement of realistic and documented treatment goals, and comply or satisfy the intent of the referring medical staff. The health care worker shall:
- 3.1.1. Test and measure patient's strength, motor development, sensory perception, functional capacity, and respiratory and circulatory efficiency. Records findings to develop or revise treatment programs.
- 3.1.2. Plan and prepare written treatment programs based on evaluation of patient data.
- 3.1.3. Administer manual exercises to improve and maintain function.
- 3.1.4. Instruct, motivate, and assist patient in performing various physical activities, such as nonmanual exercises, ambulatory functional activities, daily-living activities, and in use of assistive and supportive devices, such as crutches, canes, and prostheses.

- 3.1.5. Administer treatments involving application of physical agents, using equipment such as hydrotherapy tanks and whirlpool baths, moist packs, ultraviolet and infrared lamps, and ultrasound machines. Evaluate effects of treatment at various stages and adjusts treatments to achieve maximum benefit.
- 3.1.6. Administer massage, applying knowledge of massage techniques and body physiology. Administer traction to relieve pain, using traction equipment.
- 3.1.7. Record treatment, response, and progress in patient's chart or CHCS.
- 3.1.8. Instruct patient and family in treatment procedures to be continued at home. Evaluate, fit, and adjust prosthetic and orthotic devices and recommend modification as required.
- 3.1.9. Coordinate treatment with physician and other staff members to obtain additional patient information, suggest revisions in treatment program, and integrate physical therapy treatment with other aspects of the patient's health care.
- 3.1.10. Maintain department equipment and supplies.
- 3.1.11. Orient, instruct, and direct work activities of assistants, aides, students, etc.
- 3.1.12. Contact referring physicians regarding patient care concerns, as required.
- 3.1.13. Provide input and attend any meetings, rehabilitation team meetings, seminars and quality assurance meetings (during contracted hours) as required by the Commanding Officer.
- 3.1.14. Provide documented treatment and discharge recommendations to members of the staff in routine, emergency and special cases as needed.
- 3.1.15. Provide periodic training/advice as required to promulgate the needs of the technicians.
- 3.1.16. Support Occupational/Physical Therapy Technician(s) and provide training to patients and their families.
- 5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR PHYSICAL THERAPIST. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:
- 5.1. Possess a Masters of Science Degree in Physical Therapy, or a Bachelors of Science Degree with a specialization in Orthopedic or Sports Medicine Physical Therapy, from a college of Physical Therapy accredited by the American Physical Therapy Association.
- 5.2. Have at least two years post graduate experience as a physical therapist within the preceding five years.
- 5.3. Possess a current, unrestricted license to practice physical therapy in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. You are responsible for complying with all applicable state licensing regulations.
- 5.4. Provide three letters of recommendation from physical therapy supervisors, physicians or hospital administrators attesting to your ability, skills and knowledge. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

ATTACHMENT 003 REGISTERED NURSE

- 1. SCOPE AND LOCATION. The healthcare worker provides Registered Nurse services for the Directorate of Specialty Services of Naval Hospital Camp Pendleton, California or its associated Branch Medical Clinics. The primary locations are the Naval Hospital and 52 Area Sports Medicine And Rehabilitation Therapy Center. Assignment to another Branch Medical Clinic within a 35-mile radius of Naval Hospital may be required. The primary scope of duties is to coordinate patient care for Musculoskeletal Services.
- 2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 1 provider to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.
- 2.1. The contractor shall provide a Registered Nurse. The work schedule consists of 8-hour shifts, between 0700-1700 with a .5-hour uncompensated meal break on a Monday through Friday basis. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.
- 2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays and the Friday after Thanksgiving; therefore, the Contractor will not be compensated by the Government for the holidays or the Friday after Thanksgiving.
- 3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Registered Nurse duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Director of Musculoskeletal Service, the Registered Nurse shall:
- 3.1. Participates in Musculoskeletal planning with the MSS Leadership Team. Planning includes providing input to the development of a mission, vision, and values for the MSS with the focus on patient needs and high quality cost efficient operations.
- 3.2. Coordinates, implements, directs and evaluates patient care. Ensures that the highest standard of services maintained, that every effort is made to keep the quality of healthcare at the optimum level.
- 3.3. Provides nursing input to the planning and designing of MSS and insures timely services appropriate to the scope and level of care required by patient, in concert with patient and family needs/expectations.
- 3.4. Assists the Director of MSS in the gathering, assessing, and responding to information regarding patient and family satisfaction with services provided.
- 3.5. Reviews all consults for Musculoskeletal Services and directs the consults to the appropriate section.
- 3.6. Triages consults for urgency and ensures patients are seen in a time appropriate manner.
- 3.7. Troubleshoots all patient appointment problems.

- 3.8. Ensures access to care standards is met.
- 3.9. Gathers and analyzes data for MSS Leadership team on access, patient types, source of consults and appropriateness of consults.
- 3.10. Initiates patient care process improvement.
- 3.11. Provides effective leadership through:
- 3.11.1. Development and implementation of policies and procedures that guide and support the provision of services.
- 3.11.2. Assessment of the numbers and qualifications of personnel needed to support MSS needs in providing competent, safe services and providing this information to the Director of MSS.
- 3.11.3. Continuous assessment of quality of services.
- 3.11.4. Development and implementation of process improvement.
- 3.11.5. Coordinates activity for continuous education at all staffing levels.
- 3.11.6. Evaluates and recommendation on space and other resource needs and usage.
- 3.11.7. Ensures compliance with command policies and procedures, standards of practice and regulatory standards established by JACHO, federal, state and local authorities.
- 3.11.8. Initiates, reviews and provides input on all patient care matters.
- 4. RESERVED.
- 5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR REGISTERED NURSES. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:
- 5.1. Possess a Baccalaureate Degree in Nursing or an Associate Degree in Nursing from a Nursing Program accredited by the National League for Nursing Accrediting Commission (NLNAC), and
- 5.2. Possess a current unrestricted license to practice as a registered nurse in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the Commissioner of Graduates of Foreign Nursing Schools exam or the National Council Licensure Exam (NCLEX). Foreign RN graduates must have three years experience working in the United States in addition to all other requirements, and
- 5.6. Possess a minimum of 5 years of experience as a Registered Nurse in the field of Orthopedics or Sports Medicine.
- 5.4. Provide three letters of recommendation from physicians or hospital administrators attesting to your ability, skills and knowledge in performing Registered Nurse services in an Orthopedic or Sports Medicine setting. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

ATTACHMENT 004 PHYSICAL THERAPY ASSISTANT

- 1. SCOPE AND LOCATION. The healthcare worker provides Physical Therapy Assistant services for the Directorate of Specialty Services of Naval Hospital Camp Pendleton, California or its associated Branch Medical Clinics. The primary locations are the Naval Hospital and 52 Area Sports Medicine and Rehabilitation Therapy (SMART) Center. Assignment to another Branch Medical Clinic within a 35-mile radius of Naval Hospital may be required. The purpose of the position is to carry out highly specialized and diversified treatment activities as directed by a Physical Therapist for the physical rehabilitation of patients. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent Physical Therapy Assistant identifies, measures and evaluates patient and program outcomes; institutes actions to improve care; adheres to and communicates standards of practice; demonstrates professional competency; and ensures the clinical practice, competencies and performance of other assigned nursing personnel. Further, a competent Physical Therapy Assistant conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.
- 2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 4 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.
- 2.1 The contractor shall provide 2 Physical Therapy Assistants. The work schedule consists of 8-hour shifts between 0700-1700 hours with a .5-hour uncompensated meal break on a Monday through Friday basis. Shift rotations are scheduled every six weeks. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.
- 2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays and the Friday after Thanksgiving; therefore, the Contractor will not be compensated by the Government for the holidays or the Friday after Thanksgiving.
- 3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Certified Nursing Assistant duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Lead Petty Officer, Physical Therapy Division, the Physical Therapy Assistants shall:
- 3.1. Administers the full range of physical agents such as light, heat, water and therapeutic exercises based on the evaluation recommendations as set forth by a licensed Physical Therapist.
- 3.2. Establishes constructive relationships with individual patients for the purpose of exploring interests, attitudes and abilities through interview and observation. Assists Physical Therapists in performing tests and measurements of muscles, nerve, skin, temperature, range of motion, posture, strength and the ability to perform activities of daily living.

- 3.3. Identifies and meets needs of patients for information and guidance in daily living. Provides training and instructions to patients in muscle re-education and ambulation: in the use of crutches, canes, and walkers; and in the application of slings, braces and other prosthetic or orthotic devices.
- 3.4. Promotes a sense of worth and dignity in the patient by fostering increased self-reliance and independence.
- 3.5. Maintains statistical records, receives patients, prepares all patient documentation and patient profiles.
- 3.6. Participates in staff quality control, quality assurance and quality management.
- 3.7. Participate in clinic and organizational quality improvement programs including, but not limited to, patient needs surveys, patient satisfaction, and records review to ensure accuracy of data submitted in required reports.
- 3.8. Provide environmental safety, security and patient privacy, and general cleanliness.
- 3.9. Maintain current command and JCAHO certifications and training requirements for fire, safety, infection control, customer service, and emergency response plans, including Basic Life Support.
- 3.10. Stock patient care areas and/or clerical areas with needed supplies. Order needed supplies when stock is low.
- 4. RESERVED.
- 5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR PHYSICAL THERAPY ASSITANT. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:
- 5.1. Have successfully completed a Physical Therapy Assistant Program accredited by the American Physical Therapy Association.
- 5.2. Possess a either a), certification as a physical therapy assistant/technician as determined by the American Physical Therapy Association (APTA), or b), State licensure as a physical therapy assistant/technician.
- 5.1.2. Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, or Physical Therapist, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.

ATTACHMENT 005 CERTIFED MEDICAL ASSISTANT

- 1. SCOPE AND LOCATION. The healthcare worker provides CERTIFED MEDICAL ASSISTANT services for the Directorate of Specialty Services of Naval Hospital Camp Pendleton, California or its associated Branch Medical Clinics. The primary locations are the Naval Hospital and 52 Area Sports Medicine And Rehabilitation Therapy Center. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent CMA conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.
- 2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 2 providers to meet these requirements. The contractor may credential up to 1.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.
- 2.1 The contractor shall provide 1 CMA. The work schedule consists of 8-hour shifts, between 0700-1700 hours, with a .5-hour uncompensated meal break on a Monday through Friday basis. Shift rotations are scheduled every six weeks. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.
- 2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays and the Friday after Thanksgiving; therefore, the Contractor will not be compensated by the Government for the holidays or the Friday after Thanksgiving.
- 3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Certified Nursing Assistant duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Registered Nurse for Musculoskeletal Services, Certified Nursing Assistants shall:
- 3.1. Obtaining vital signs from patients.
- 3.2. Administering commonly prescribed medications.
- 3.3. Receive patients seeking information or treatment in person or via telephone.
- 3.4. Provide patient education on system processes, medical procedures and health information, as needed using approved clinic guidelines.
- 3.5. Assist the providers in patient examinations and minor surgical or medical procedures, assuring patient privacy, comfort and safety.
- 3.6. File laboratory, radiology, and other reports. Copy patient records, as required.
- 3.7. Type correspondence and address labels when requested by the provider.

- 3.8. Obtain lab specimens as ordered by the provider. Review lab results and inform provider of abnormalities to facilitate prompt medical treatment as necessary.
- 3.9. Use computer systems to order labs and radiographic tests, and retrieve results.
- 3.10. Use CHCS system to schedule patient appointments as directed, check in patients producing encounter forms and workload forms, record telephone consultations, record appointment status, obtain organizational information via E-mail, maintain patient data bases, and produce other reports required/requested.
- 3.11. Screens telephone calls for provider, answer routine questions on services available, access and eligibility issues, and clinic policies. Refers questions beyond scope of knowledge to the proper authority.
- 3.12. Participate in clinic and organizational quality improvement programs including, but not limited to, patient needs surveys, patient satisfaction, and records review to ensure accuracy of data submitted in required reports.
- 3.13. Provide environmental safety, security and patient privacy, and general cleanliness.
- 3.14. Maintain current command and JCAHO certifications and training requirements for fire, safety, infection control, customer service, and emergency response plans, including Basic Life Support.
- 3.15. Stock patient care areas and/or clerical areas with needed supplies. Order needed supplies when stock is low.
- 4. RESERVED.
- 5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR CERTIFIED MEDICAL ASSISTANT. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:
- 5.1. Have either: successfully completed a Medical Assistant Training Course within the preceding 12 months; possess current licensure as an LPN/LVN and experience as an LPN/LVN or CMA of at least 12 months within the preceding 36 months; or possess certification as a military medical technician/hospital corpsman/medic and have at least 12 months experience as a military medical technician/hospital corpsman/medic within the preceding 36 months.
- 5.1.2. Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, or RN, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.

ATTACHMENT 006 SUPPLEMENTAL PRICING WORKSHEETS

Physician Assistant	Minimum Compensation for Physician Assistant	Average Compensation for Physician Assistant
Hourly Rate (direct compensation)	<i>y</i>	<i>ya a a a a a a a a a a a a a a a a a a </i>
to the healthcare worker		
Fringe Benefits* (expressed only		
in dollars and cents)		
Total Hourly Compensation to the		
healthcare worker		
Physical Therapist	Minimum Compensation for Physical Therapist	Average Compensation for Physical Therapist
Hourly Rate (direct compensation)		
to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		
Registered Nurse	Minimum Compensation for Registered Nurse	Average Compensation for Registered Nurse
Hourly Rate (direct compensation)		
to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		
	1	1
Physical Therapy Assistant	Minimum Compensation for	Average Compensation for
	Physical Therapy Assistant	Physical Therapy Assistant
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only		
in dollars and cents)		
Total Hourly Compensation to the healthcare worker		
Certified Medical Assistant	Minimum Compensation for Certified Medical Assistant	Average Compensation for Certified Medical Assistant
Hourly Rate (direct compensation)		
to the healthcare worker		
Fringe Benefits* (expressed only		
in dollars and cents)		
Total Hourly Compensation to the		
healthcare worker		

*Fringe Benefits include non-cash compensation provided to employees (including that necessary to comply with Department of Labor compensation requirements), such as 401(k), Insurance (Medical/Dental/Life), Continuing Education Expenses, Bonuses, Incentives, and Uniform Allowances

On an attached page, provide any other fringe benefits offered but not included in the fringe benefit rate above. Specify and describe the value of these benefit(s).

On an attached page, provide any notes regarding source information used to develop these rates.

Provide the following regarding the schedule under which this requirement is being proposed.

Labor Category	Maximum Price	Proposed Discount	Notes/Comments
	Allowable under FSS/VA	(expressed as a %)	
	621-1 for the Labor		
	Category		
Physician Assistant			
Registered Nurse			
Physical Therapist			
Physical Therapy			
Assistant			
Certified Medical			
Assistant			

Signature	
Title	
Organization	
Date	

ATTACHMENT 007A PHYSICIAN ASSISTANT RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide

nformation may result in the den	ial of the opportunity to	enter into a contra	act.
	(Signa	ature)	(Date)mm/dd/yy)
2. Malpractice Risk Information. In acceptable malpractice risk to the Gibbs consideration of a Government of a Government of the dental series of the consideration of a Government of the dental series of the dental ser	overnment. The informatic contract; disclosure of	ation provided is p the information is	part of my response to and for use in s voluntary; failure to provide
MALPRACTICE RISK INFORMA	ATION		
1. Have you ever been the subject of claim? (indicate final disposition of		<u>Yes</u>	<u>No</u>
2. Have you ever been a defendant misdemeanor case? Indicate final of the case in comments)			
B. Has your license to practice or E ever been revoked or restricted in a			
f any of the above is answered "yes charges for numbers 1 and 2 above,			address the disposition of the claim or above.
B. Resumes/Curriculum Vitae. Evo your resume. Any additional inform			essed. Please sign and date at the end of te sheet of paper.
A. General Information. At a min	nimum, include		

Your name (Last/First/Middle), and Your Social Security Number, and Your current Address (address/city/state/zip code), and Telephone numbers where you may be reached (including area code), and Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Possess a degree from a physician assistant training program accredited by the Committee on Allied Health

Education and Accreditation (CAHEA) and the National Commission on Certification of Physician Assistants.

Possess a current unrestricted license to practice as a physician assistant in any one of the fifty states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations.

Possess a current Drug Enforcement Agency certification (DEA number), and

Possess certification as a physician assistant by the National Commission on Certification of Physician Assistants.

- C. <u>Continuing Education:</u> Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing education within the last 12 months. Provide the course name, course dates and, CEU/contact hours received.
- D. <u>BLS</u>: Evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of <u>both sides</u> of the card shall be submitted. <u>DO NOT SUBMIT THE ORIGINAL CARD.</u>
- E. <u>Professional Employment:</u> Current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's Nurse Practitioner experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

- F. <u>Employment Eligibility:</u> Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.
- G. <u>Professional References:</u> Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.
- H. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR, Varicella, Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).
- I. <u>Additional Information:</u> Provide any additional information that may enhance the healthcare worker's ranking such as professional certifications, the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

J. Certification of Accuracy. The healthcare work	er shall provide the following certification:	
I hereby certify the above information to be true and accurate:		
(Signature)	(Date) (mm/dd/yy)	

ATTACHMENT 007B PHYSICAL THERAPIST RESUME/CURRICULUM VITAE

1. <u>Health Certification</u>. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

information may result in the deni	al of the opportunity to enter	into a contra	act.
	(Signature)	· · · · · · · · · · · · · · · · · · ·	(Date)mm/dd/yy)
2. Malpractice Risk Information. In acceptable malpractice risk to the G the consideration of a Governmen information may result in the deni	overnment. The information pt t contract; disclosure of the in	provided is p formation is	art of my response to and for use in voluntary; failure to provide
MALPRACTICE RISK INFORMA	TION		
Have you ever been the subject of claim? (indicate final disposition of		Yes	<u>No</u>
2. Have you ever been a defendant misdemeanor case? Indicate final dof the case in comments)	in a felony or		
3. Has your license to practice or D ever been revoked or restricted in ar			_
If any of the above is answered "yes charges for numbers 1 and 2 above,	•	1 .	address the disposition of the claim or above.
3. <u>Resumes/Curriculum Vitae</u> . Eve your resume. Any additional inform			essed. Please sign and date at the end of the sheet of paper.

A. **General Information.** At a minimum, include

Your name (Last/First/Middle), <u>and</u>
Your Social Security Number, <u>and</u>
Your current Address (address/city/state/zip code), <u>and</u>
Telephone numbers where you may be reached (including area code), <u>and</u>
Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Possess a Masters of Science Degree in Physical Therapy, or a Bachelors of Science Degree with a specialization in Orthopedic or Sports Medicine Physical Therapy, from a college of Physical Therapy accredited by the American Physical Therapy Association.

Possess a current, unrestricted license to practice physical therapy in any one of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. You are responsible for complying with all applicable state licensing regulations.

- C. <u>Continuing Education:</u> Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing education within the last 12 months. Provide the course name, course dates and, CEU/contact hours received.
- D. <u>BLS</u>: Evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of <u>both sides</u> of the card shall be submitted. <u>DO NOT SUBMIT THE ORIGINAL CARD.</u>
- E. <u>Professional Employment:</u> Current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's Nurse Practitioner experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

- F. <u>Employment Eligibility:</u> Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.
- G. <u>Professional References:</u> Provide three letters of recommendation from physical therapy supervisors, physicians or hospital administrators attesting to your ability, skills and knowledge. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.
- H. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR, Varicella, Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).
- I. <u>Additional Information:</u> Provide any additional information that may enhance the healthcare worker's ranking such as professional certifications, the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.
- J. Certification of Accuracy. The healthcare worker shall provide the following certification:

 I hereby certify the above information to be true and accurate:

 (Signature) (Date) (mm/dd/yy)

ATTACHEMENT 0007C REGISTERED NURSE RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement

requirement.			
PRIVACY ACT STATEMENT			
Under 5 U.S.C. 552a and Executive Order 9397, the consideration of a Government contract; disclinformation may result in the denial of the opport	osure of the inform	nation i	is voluntary; failure to provide
	(Signature)		(Date)mm/dd/yy)
2. <u>Malpractice Risk Information</u> . Individuals provid acceptable malpractice risk to the Government. The the consideration of a Government contract; disclinformation may result in the denial of the opport MALPRACTICE RISK INFORMATION	information provi osure of the inform	ded is nation i	part of my response to and for use in is voluntary; failure to provide
Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	ts)	Yes	<u>No</u>
2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments)			_
3. Has your license to practice or DEA certification ever been revoked or restricted in any state?			_
If any of the above is answered "yes" attach a detaile	ed explanation. Spe	cificall	y address the disposition of the claim or

r charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. General Information. At a minimum, include

Your name (Last/First/Middle), and Your Social Security Number, and Your current Address (address/city/state/zip code), and Telephone numbers where you may be reached (including area code), and Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

The name and location of the college/institution that conferred the healthcare worker's nursing degree or certificate and the date of that degree or certificate, and

All current, unrestricted licenses to practice nursing held by the healthcare worker in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, (including state of issuance, date of issuance and, date of expiration), and

- C. <u>Continuing Education:</u> Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.
- D. <u>BLS</u>: Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of <u>both sides</u> of the card shall be submitted. <u>DO NOT SUBMIT THE ORIGINAL</u> CARD.
- E. <u>Professional Employment:</u> List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

- F. <u>Employment Eligibility:</u> Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.
- G. <u>Professional References:</u> Provide three letters of recommendation from physicians or hospital administrators attesting to your ability, skills and knowledge in performing Registered Nurse services in an Orthopedic or Sports Medicine setting. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.
- H. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR, Varicella, Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).
- I. <u>Additional Information:</u> Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

(Date) (mm/dd/yy)

J. Certification of Accuracy. The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

ATTACHMENT 007D PHYSICAL THERAPY ASSISTANT RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide

nformation may result in the deni	al of the opportunity to ent	er into a contr	act.
	(Signatur	e)	(Date)mm/dd/yy)
2. Malpractice Risk Information. In acceptable malpractice risk to the Garage the consideration of a Government of a Government of the denial content of t	overnment. The information to contract; disclosure of the	n provided is j information i	part of my response to and for use in s voluntary; failure to provide
MALPRACTICE RISK INFORMA	TION		
I II.	f a malmostica	Yes	No
1. Have you ever been the subject of claim? (indicate final disposition of			_
2. Have you ever been a defendant misdemeanor case? Indicate final defendance of the case in comments)			
B. Has your license to practice or D ever been revoked or restricted in an			_
f any of the above is answered "yes charges for numbers 1 and 2 above,			y address the disposition of the claim or 3 above.
3. <u>Resumes/Curriculum Vitae</u> . Eve your resume. Any additional inform			essed. Please sign and date at the end of ate sheet of paper.
A. General Information. At a min	imum, include		

Your name (Last/First/Middle), and Your Social Security Number, and Your current Address (address/city/state/zip code), and Telephone numbers where you may be reached (including area code), and Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Proof of successful completion of a Physical Therapy Assistant Program accredited by the American Physical

Therapy Association.

- C. <u>Continuing Education:</u> Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.
- D. <u>BLS</u>: Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of <u>both sides</u> of the card shall be submitted. <u>DO NOT SUBMIT THE ORIGINAL</u> CARD.
- E. <u>Professional Employment:</u> List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

- F. <u>Employment Eligibility:</u> Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.
- G. <u>Professional References:</u> Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, or Physical Therapist, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.
- H. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR, Varicella, Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).
- I. <u>Additional Information:</u> Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.
- J. Certification of Accuracy. The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and	accurate:
(Signature)	(Date) (mm/dd/yy)

ATTACHMENT 007E CERTIFIED MEDICAL ASSISTANT RESUME/CURRICULUM VITAE

1. <u>Health Certification</u>. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

information may result in the denial of the opportunity to enter into a contract.						
_	(Signature)		(Date)mm/dd/yy)			
2. Malpractice Risk Information. Indeacceptable malpractice risk to the Gov the consideration of a Government cinformation may result in the denial	rernment. The information pontract; disclosure of the in	provided is p nformation is	part of my response to and for use in s voluntary; failure to provide			
MALPRACTICE RISK INFORMAT	ION					
1. Have you are hearth and exhibit of		Yes	No			
 Have you ever been the subject of a claim? (indicate final disposition of ca 						
2. Have you ever been a defendant in misdemeanor case? Indicate final dispos the case in comments)						
,						
Has your license to practice or DEA ever been revoked or restricted in any			<u> </u>			
If any of the above is answered "yes" a charges for numbers 1 and 2 above, an		1 .	address the disposition of the claim or above.			
3. <u>Resumes/Curriculum Vitae</u> . Every your resume. Any additional information			essed. Please sign and date at the end of the sheet of paper.			
A. General Information. At a minim	num, include					

Telephone numbers where you may be reached (including area code), <u>and</u> Email address(es) where you may be reached.

Your current Address (address/city/state/zip code), and

Your name (Last/First/Middle), and Your Social Security Number, and

B. Professional Education/Certifications. At a minimum, include:

Provided documentation of Medical Assistant Training Course within the preceding 12 months; possess current

licensure as an LPN/LVN and experience as an LPN/LVN or CMA of at least 12 months within the preceding 36 months; or possess certification as a military medical technician/hospital corpsman/medic and have at least 12 months experience as a military medical technician/hospital corpsman/medic within the preceding 36 months.

- C. <u>Continuing Education:</u> Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.
- D. <u>BLS</u>: Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of <u>both sides</u> of the card shall be submitted. <u>DO NOT SUBMIT THE ORIGINAL</u> CARD.
- F. <u>Professional Employment:</u> List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

- G. <u>Employment Eligibility:</u> Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.
- H. <u>Professional References:</u> Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, or RN, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.
- I. <u>Required Immunizations/Screening Tests:</u> Provide evidence of immunity to MMR, Varicella, Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).
- J. <u>Additional Information:</u> Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

I hereby	I hereby certify the above information to be true and accurate:					
	(Signature)	(Date) (mm/dd/yy)				

K. Certification of Accuracy. The healthcare worker shall provide the following certification:

ATTACHMENT 0008 PROOF OF US EMPLOYMENT ELIGIBILITY

LISTS OF ACCEPTABLE DOCUMENTS
EITHER SUBMIT ONE DOCUMENT FROM LIST A
OR SUBMIT ONE FROM LIST B AND ONE FROM LIST C
LIST A

(Documents that Establish Both Identity and Employment Eligibility)

- 1. U. S. Passport (unexpired or expired)
- 2. Certificate of U. S. Citizenship (INS Form N-560 or N-561)
- 3. Certificate of Naturalization (INS Form N-550 or N-570)
- 4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization.
- 5. Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)
- 6. Unexpired Temporary Resident Card (INS Form I-688)
- 7. Unexpired Employment Authorization Card (INS Form I-688A)
- 8. Unexpired Reentry Permit (INS Form I-327)
- 9. Unexpired Refugee Travel Document (INS Form I-571)
- 10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-698B)

LIST B

Documents that Establish Identity

1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address

LIST C

Documents that Establish Employment Eligibility

1. U.S. social security card issued by the Social Security Administration (other than a card stating it is not valid for employment)

PROOF OF U.S. EMPLOYMENT ELIGIBILITY (CONTINUED)

- 2. ID card issued by federal, state or local government agencies of entitles provided it contains a photograph or information such as name, date of birth, sex height, eye color, and address
- 3. School ID card with a photograph
- 4. Voter's registration card
- 5. U.S. Military card or draft record
- 6. Military dependant's ID Card
- 7. U.S. Coast Guard Merchant Mariner Card
- 8. Native American tribal document
- 9. Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above;
- 10. School record or report card
- 11. Clinic, doctor, or hospital record
- 12. Day-care or nursery school record

- 2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)
- 3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
- 4. Native American Tribal document
- 5. U.S. Citizen ID Card (INS Form I-197)
- 6. ID Card for use of Resident Citizen in the United States (INS Form I-179)
- 7. Unexpired employment authorization document issued by the INS (other than those listed under List a).

ATTACHMENT 009 PAST PERFORMANCE FORMAT

Dof	Number of HCWs	Tomas af HOWa	Location of Services	Start	End Date	Name. Telephone number, email address of <u>verified</u> point of contact
Ref	(by FTE)	Types of HCWs	Services	Date	Date	point of contact
1						
2						
3						
4						
-						
5						